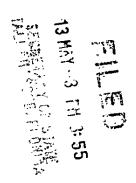
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(Req	uestor's Name)	
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Certified Copies	Certificates	of Status
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MAY U O WHI D. BUTLER

COVER LETTER

:TO:

Registration Section
Division of Corporations

SUBJECT:

AppDaddy.net LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Miles M. Hillman

Name of Person

AppDaddy.net LLC

Firm/Company

405 S Dale Mabry Hwy Ste 360

Address

Tampa FL 33609

City/State and Zip Code

admin@crucialmobile.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

M. Hillman

,⁸¹³ ,421-0174

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AppDaddy.net LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	and assigned	
Florida document number L12000133713		The state of the s
riorida document mamber		
This amendment is submitted to amend the following:		<u>ن ت</u>
		777
A. If amending name, enter the new name of the limited liab	oility company here:	
CrucialMobile.com LLC	. •	
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Company," the designation	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:	405 South Dale Mabry	Hwy
(Principal office address MUST BE A STREET ADDRESS)	Suite 360	
	Tampa FL 33609	
Enter new mailing address, if applicable:	405 South Dale Mabry	Hwy
(Mailing address MAY BE A POST OFFICE BOX)	Suite 360	
	Tampa FL 33609	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	fice address on our records, <u>ent</u> <u>e</u> :	ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	address
	, Florida	1
	City	Zip Code
No. 10 and a second		

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent



If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address <u>T</u>	Type of Action
MGRM	William Hillman III	405 South Dale Mabry Hwy	Add
		Suite 360	Remove
		Tampa FL 33609	_
	•		Add
			Remove
			Add
			Remove
			· D:
		THE CONTRACT OF THE CONTRACT O	Add
			Remove
			Add
	•		Remove
		·	
			Add
		<u>· </u>	Remove
		•	

If amending any other information	on, enter change(s) here: (Attach additional sheets, if necessary.)
May 1	, <u>2013</u>
	Miles Hilman
	ture of a member or authorized representative of a member
Miles M. Hillman	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

13 MAY -- 3 PM 3- 55